

<b>MARYLAND SENTENCING GUIDELINES WORKSHEET</b>			OFFENDER NAME - Last, First, Middle BLACKMAN, JULIAN			SID# 4717690		SEX ___ M ___ F		BIRTHDATE 04   04   2000		JURISDICTION 10													
			PSI ___ Yes ___ No		DATE OF OFFENSE 06   28   2018		DATE OF SENTENCING 03   01   2019		DISPOSITION TYPE ___ ABA plea agreement ___ Jury trial ___ Non-ABA plea agreement ___ Reconsideration <input checked="" type="checkbox"/> Plea, no agreement ___ Review ___ Court trial			REPRESENTATION ___ Private <input checked="" type="checkbox"/> Public Defender ___ Court Appointed ___ Self		ETHNICITY Hispanic/Latino Origin ___ Yes ___ No Victim Court Costs Imposed <input checked="" type="checkbox"/> Yes ___ No		RACE ___ Unidentifiable ___ Black ___ Asian ___ White ___ Other ___ Native Hawaiian/Pacific Islander ___ American Indian/Alaskan Native									
AT THIS SENTENCING, NUMBER OF:			CONVICTED OFFENSES 2		CRIMINAL EVENTS 1		WORKSHEET # <u>1</u> OF CRIMINAL EVENT # <u>1</u>																		
CONVICTED OFFENSE TITLE														I-VII		CJIS CODE		MD CODE, ART. & SECTION		STAT. MAX		MIN TERM		CASE #	
1 <sup>st</sup> Convicted Offense Possession of visual representations of persons younger than 16 years old engaged in certain sexual acts, 1st offense														V		1-1756		CR. §11-208(b)(1)		5Y				C10CR18000914	
2 <sup>nd</sup> Convicted Offense Possession of visual representations of persons younger than 16 years old engaged in certain sexual acts, 1st offense														V		1-1756		CR. §11-208(b)(1)		5Y				C10CR18000914	
3 <sup>rd</sup> Convicted Offense																									
OFFENSE SCORE(S) — Offense Against a Person Only														OFFENDER SCORE				GUIDELINES RANGE		ACTUAL SENTENCE — Imposed, Suspended, Time Served, Probation, Restitution, Fine, Corrections Options Programs (Drug Treatment Court, Home Detention, Etc.)					
1 <sup>st</sup> Off 2 <sup>nd</sup> Off 3 <sup>rd</sup> Off A. Seriousness Category ① ① 1 = V – VII 3 3 3 = IV 5 5 5 = III 8 8 8 = II 10 10 10 = I 1 <sup>st</sup> Off 2 <sup>nd</sup> Off 3 <sup>rd</sup> Off B. Victim Injury 0 0 0 = No Injury ① ① 1 = Injury, Non-Permanent 2 2 2 = Permanent Injury or Death 1 <sup>st</sup> Off 2 <sup>nd</sup> Off 3 <sup>rd</sup> Off C. Weapon Presence ① ① 0 = No Weapon 1 1 1 = Weapon Other Than Firearm 2 2 2 = Firearm or Explosive 1 <sup>st</sup> Off 2 <sup>nd</sup> Off 3 <sup>rd</sup> Off D. Special Victim Vulnerability 0 0 0 = No ① ① 1 = Yes														A. Relationship to CJIS When Instant Offense Occurred ① = None or Pending Cases 1 = Court or Other Criminal Justice Supervision B. Juvenile Delinquency ① = 23 years or older or 0 findings of a delinquent act w/in 5 years of the date of the most recent instant offense 1 = Under 23 years and: 1 or 2 findings of a delinquent act w/in 5 years of the date of the most recent instant offense 2 = Under 23 years and: 3 or more findings of a delinquent act w/in 5 years of the date of the most recent instant offense C. Prior Adult Criminal Record ① = None 3 = Moderate 1 = Minor 5 = Major D. Prior Adult Parole/Prob Violation ① = No 1 = Yes				1 <sup>st</sup> Con. Off. p 2Y TO		1 <sup>st</sup> Convicted Offense Suspended 4 year(s) 0 month(s) 363 day(s) Jail/Prison 0 year(s) 0 month(s) 0 day(s) Total Sentence 5 year(s) 0 month(s) 0 day(s) Home Detention 0 month(s) Credit 2 day(s) For Theft, Fraud, and Related Crimes, please indicate: Economic loss \$ _____ : Unknown Amount Subsequent Offender Fined Yes ___ No ___ Restitution Requested Yes ___ No ___ Subsequent Offender Proven Yes ___ No ___ Restitution Proven Yes ___ No ___					
2 <sup>nd</sup> Off 3 <sup>rd</sup> Off 4 <sup>th</sup> Off A. Seriousness Category ① ① ① ① = V – VII 3 3 3 3 = IV 5 5 5 5 = III 8 8 8 8 = II 10 10 10 10 = I 1 <sup>st</sup> Off 2 <sup>nd</sup> Off 3 <sup>rd</sup> Off 4 <sup>th</sup> Off B. Victim Injury 0 0 0 0 = No Injury ① ① ① ① = Injury, Non-Permanent 2 2 2 2 = Permanent Injury or Death 1 <sup>st</sup> Off 2 <sup>nd</sup> Off 3 <sup>rd</sup> Off 4 <sup>th</sup> Off C. Weapon Presence ① ① ① ① = No Weapon 1 1 1 1 = Weapon Other Than Firearm 2 2 2 2 = Firearm or Explosive 1 <sup>st</sup> Off 2 <sup>nd</sup> Off 3 <sup>rd</sup> Off 4 <sup>th</sup> Off D. Special Victim Vulnerability 0 0 0 0 = No ① ① ① ① = Yes														A. Relationship to CJIS When Instant Offense Occurred ① = None or Pending Cases 1 = Court or Other Criminal Justice Supervision B. Juvenile Delinquency ① = 23 years or older or 0 findings of a delinquent act w/in 5 years of the date of the most recent instant offense 1 = Under 23 years and: 1 or 2 findings of a delinquent act w/in 5 years of the date of the most recent instant offense 2 = Under 23 years and: 3 or more findings of a delinquent act w/in 5 years of the date of the most recent instant offense C. Prior Adult Criminal Record ① = None 3 = Moderate 1 = Minor 5 = Major D. Prior Adult Parole/Prob Violation ① = No 1 = Yes				2 <sup>nd</sup> Con. Off. p 2Y TO		2 <sup>nd</sup> Convicted Offense Suspended 5 year(s) 0 month(s) 0 day(s) Jail/Prison 0 year(s) 0 month(s) 0 day(s) Total Sentence 5 year(s) 0 month(s) 0 day(s) Home Detention 0 month(s) Credit 0 day(s) For Theft, Fraud, and Related Crimes, please indicate: Economic loss \$ _____ : Unknown Amount Subsequent Offender Fined Yes ___ No ___ Restitution Requested Yes ___ No ___ Subsequent Offender Proven Yes ___ No ___ Restitution Proven Yes ___ No ___					
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3 3 OFFENSE SCORE(S)														0 OFFENDER SCORE				Overall Guidelines Range Multiple Counts Only P 2Y TO		Was the offender sentenced to a Corrections Options program under Commission criteria? Drug Court ___ Yes <input checked="" type="checkbox"/> No Other ___ Yes <input checked="" type="checkbox"/> No		JOYCE KING			
VICTIM INFORMATION														REASONS FOR GUIDELINES DEPARTURE				Additional Sentence Information Probation 5Y Community Service 250 Hours Fine \$ 100				Worksheet Completed By			
Victim Participation ___ Yes ___ No Victim Notification Form ___ Yes ___ No Victim Notified Plea ___ Yes ___ No Victim Notified Date ___ Yes ___ No Victim Present ___ Yes ___ No Written VIS ___ Yes ___ No Oral VIS ___ Yes ___ No No Contact Requested ___ Yes ___ No No Contact Ordered <input checked="" type="checkbox"/> Yes ___ No														Departure Code 9 or 18 (Please Explain):  Entered: Clerk, Circuit Court for Frederick County, MD April 18, 2019				Institutional/Parole Recommendation or Additional Information  Parole Notification ___ Yes <input checked="" type="checkbox"/> No				Title State's Attorney's Office Richard Sandy Sentencing Judge (Please Print) Sentencing Judge's Signature			
DEPARTURE ___ Yes <input checked="" type="checkbox"/> No																									

Court Clerks should attach completed copies to the commitment or probation order and also distribute copies to the following: sentencing judge, court file, prosecution and defense